

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	Dependents of Debtor and Spouse	
<b>Married</b>	Relationship(s): Spouse      Age(s):	Relationship(s):      Age(s):
<b>Employment:</b>	Debtor	Spouse
Occupation	Nursery Attendant	
Name of Employer	Baptist Healthplex	
How Long Employed	1 yr	
Address of Employer	Oxford, MS 38655	

INCOME: (Estimate of average or projected monthly income at time case filed)	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$408.99	
2. Estimate monthly overtime	\$0.00	
3. SUBTOTAL	\$408.99	
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes (includes social security tax if b. is zero)	\$0.00	
b. Social Security Tax	\$17.21	
c. Medicare	\$5.94	
d. Insurance	\$0.00	
e. Union dues	\$0.00	
f. Retirement	\$0.00	
g. Other (Specify) _____	\$0.00	
h. Other (Specify) _____	\$0.00	
i. Other (Specify) _____	\$0.00	
j. Other (Specify) _____	\$0.00	
k. Other (Specify) _____	\$0.00	
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$23.15	
6. TOTAL NET MONTHLY TAKE HOME PAY	\$385.84	
7. Regular income from operation of business or profession or farm (Attach detailed stmt)	\$0.00	
8. Income from real property	\$0.00	
9. Interest and dividends	\$0.00	
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	
11. Social security or government assistance (Specify): _____	\$0.00	
12. Pension or retirement income	\$0.00	
13. Other monthly income (Specify):		
a. Food Stamps	\$270.00	
b. _____	\$0.00	
c. _____	\$0.00	
14. SUBTOTAL OF LINES 7 THROUGH 13	\$270.00	
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$655.84	
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)	\$655.84	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None.

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No b. Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. Utilities: a. Electricity and heating fuel b. Water and sewer c. Telephone d. Other:	\$150.00 \$18.00 \$60.00
3. Home maintenance (repairs and upkeep)	\$20.00
4. Food	\$270.00
5. Clothing	\$50.00
6. Laundry and dry cleaning	
7. Medical and dental expenses	
8. Transportation (not including car payments)	\$75.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$10.00
10. Charitable contributions	
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other:	
12. Taxes (not deducted from wages or included in home mortgage payments) Specify:	
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto: b. Other: c. Other: d. Other:	
14. Alimony, maintenance, and support paid to others: 15. Payments for support of add'l dependents not living at your home: 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17.a. Other: 17.b. Other:	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	<b>\$653.00</b>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: <b>None.</b>	
20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 15 of Schedule I b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	
	\$655.84 \$653.00 \$2.84